This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) COMBINED WITH POWER OF ATTORNEY

| Declaration Submitted | □ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) | Attorney Docke | t Number | CS23737RL |
|--|---|---|-------------------------------------|---|
| with Initial Filing | | First Named In | ventor | Kuchibhotla, Ravi et al. |
| | | Application Nu | mber | 10/680,690 |
| | | Filing Date | | 10/07/03 |
| ⊠ Regular (Utility) | Design application | Group Art Unit | : | |
| Application | | Examiner Nam | e | Unknown |
| As a below named inventor, | I hereby declare that | | • | |
| | - | -d b-l | | |
| My residence, post office add | ress, and citizenship are as stat | ed below next to my | name. | |
| | rst and sole inventor (if only c subject matter which is claime | | | inal, first and joint inventor (if plural on the invention entitled: |
| METHOD | FOR SELECTING A WIREL | ESS COMMUNICA | TIONS CORE | NETWORK |
| the specification of which: | | | | |
| s attached hereto | | on: <u>10/0</u> |)7/03 | |
| | as U.S. S | erial No.: 10/6 | 80,690 | |
| | and was | imended on: | | |
| | | (if applicable) | | |
| I hereby state that I have re amended by any amendment i | | ontents of the above | -identified spe | cification, including the claims, us |
| I acknowledge the duty to dis Code of Federal Regulations, | | erial to the patentabi | lity of this appl | lication in accordance with Title 37. |
| application(s) for patent or in country other than the United | nventor's certificate(s), or 365(d) States of America, listed belator's certificate(s), or any Po | a) of any PCT interrow ow and have also id | iational applica entified below, | d) or (f), or 365(b) of any foreign tion which designated at least one by checking the box, any foreign g a filing date before that of the |
| Prior Foreign Application | i i | oreign Filing Date | Priority Not | Certified Copy Attached? |
| Number(s) | Country | (MM/DD/YYYY) | Claimed | ☐ Yes ☐ No |
| Additional fauntas! | ation numbers are listed on a s | | data abaut PTO | Yes No |

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

| Provisional Application Serial No.: | |
|--------------------------------------|--|
| Provisional Application Filing Date: | |

I hereby claim the priority benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which is material to the patentability of this application and which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. Application(s):

| \boxtimes | no such application(s) filed |
|-------------|--|
| | such application(s) identified as follows: |

| Application No. | Filing Date (day, month, year) | Status (Patented, Pending, Abandoned) |
|-----------------|--------------------------------|---------------------------------------|
| | | |
| | | · |

hereby appoint the attorney(s) or agent(s) associated with: 20280 to prosecute this application and transact all business in the patent and trademark office connected therewith.

Address all telephone calls to:

Sylvia Y. Chen

Telephone:

847-523-1096

Facsimile:

847-523-2350

Address all correspondence to:

Customer Number 20280

Full name of first-named or sole inventor

Post Office Address

Roskilde

DK-4000

Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| Inventor's signature | MIT | Date | Jan 6,2004. | |
|------------------------------|------------------------------------|------------------------------|--------------------------|--|
| Residence Gurner | | II. State or Foreign Country | | |
| Citizenship <u>India</u> | Country | | Poleigh Country | |
| Post Office Address | 1093 Smithfield Ct. Street Address | | | |
| Gurnee City | IL State or Country | | 60031 Zip Code | |
| | | | · | |
| Full name of second-named jo | oint inventor | ER SKOV ANDER | | |
| Inventor's signature | 8iW 18111-+ | Date | 11th November 2003 | |
| Residence Roskil | de ity | | nmurk Forcign Country | |
| | | | | |

Street Address

Denmark

State or Country

Сопинту

Lovparken 14

| Full name of third-named joint inventor STEPHEN A. HOWELL | | | |
|---|---------------------------------------|----------|-----------------|
| Inventor's signature | _ Sffmell | Date | 6 t 5mm. 2:004 |
| | ncester | Un | ited Kingdom |
| | City | State or | Foreign Country |
| Citizenship United Kingdom Country | | | |
| Post Office Address | 56 Newstead Road, Gloucestershire GL4 | | |
| | Street Address | | |
| Gloucester | United Kingdom | | ЗТО |
| City | State or Country | | Zip Code |